

COUNTY OF FAIRFAX Department of Planning and Zoning

APPLICATION No: 50 2014-MA-084

(Staff will assign)

Zoning Evaluation Division

12055 Government Center Parkway, Suite 801 Fairfax, VA 22035 (703) 324-1290, TTY 711 www.fairfaxcounty.gov/dpz/zoning/applications Zoning Evaluation Division

MAR I 4 2014

APPLICATION FOR A SPECIAL PERMIT (PLEASE TYPE OF PRINT IN REACK INK)

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	(FLEASE TIPE OF PRINT IN BLACK INK)
APPLICANT	NAME : JOUANA VELASCE LOPEZ
	MAILING ADDRESS 55/8 HARVEY / ANE ALEXANDRIA, Va 22712 PHONE HOME (703) 6580077 WORK()
	PHONE HOME (703) 658 0077 WORK ()
	PHONE MOBILE (571) 259 206/ EMAIL Jovana Day care of mail. com.
PROPERTY INFORMATION	
	TAX MAP NO. 0811 04D 0030 SIZE (ACRES/SQ FT) 8750 59 ft. ZONING DISTRICT MAGISTERIAL DISTRICT H ASOM.
	ZONING DISTRICT R-4 MAGISTERIAL DISTRICT
	PROPOSED ZONING IF CONCURRENT WITH REZONING APPLICATION:
SPECIAL PERMIT REQUEST INFORMATION	ZONING ORDINANCE SECTION
	8-305
	PROPOSED USE
	HOME CHILD CARE FACILITY
AGENT/CONTACT INFORMATION	NAME
	MAILING ADDRESS
	PHONE HOME () WORK ()
	PHONE MOBILE () EMAIL
MAILING	Send all correspondence to (check one): Applicant -or- Agent/Contact
The name(s) and addresses of owner(s) of record shall be provided on the affidavit form attached and made part of this application. The undersigned has the power to authorize and does hereby authorize Fairfax County staff representatives on official business to enter the subject	
property as necessary to process the application.	
	E OF APPLICANT/AGENT SIGNATURE OF APPLICANT/AGENT
5128114	
DO NOT WRITE IN THIS SPACE	
Date Application accepted: 5/28/14 Application Fee Paid: \$ 435.55	